



APR 12/24/03  
PTO/SB/22 (10-00)  
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(3mws)

<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		Docket Number (Optional) 034298-068
In re Application of		
Application Number 09/621,670		Filed July 24, 2000
For DEPTH AND PUNCTURE CONTROL FOR SYSTEM FOR HEMOSTASIS OF BLOOD VESSEL		
Group Art Unit 3765	Examiner Izaguirre, Ismael	

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$
<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$930
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$

☒ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ 465.

☒ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.

☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-1698.

I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record.

☐ attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a). \_\_\_\_\_.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

April 3, 2003	
Date	Signature
04/07/2003 MBL/NCO 00000035 09621670	Adrienne Yeung, Reg. No. 44,000
02 FC:2253 465.00 OP	Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of 1 forms are submitted.

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